

BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>thr</i>	6764	4/15/00
O.I.P.E. CLASSIFIER		10	4-17-00
FORMALITY REVIEW		104853	4/19/00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final Original	Date
1	✓	4/15/00
2	✓	4/15/00
3	✓	4/15/00
4	✓	4/15/00
5	✓	4/15/00
6	✓	4/15/00
7	✓	4/15/00
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If more than 150 claims or 10 actions  
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